

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. 10/615466

FILING DATE

APPLICANT(S)

3/23/01 10/16/01 CLAIMS

AS FILED	AFTER		AFTER		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1st AMENDMENT	2nd AMENDMENT	1st AMENDMENT	2nd AMENDMENT						
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TOTAL IND.	2		2							
TOTAL DEP.	16	←	16	←						
TOTAL CLAIMS	18		18							

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